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	Constantia								
Fill	in this information to identify your c	ase:							
Del	otor 1 Bogoljub Mi	ljkovic			_				
	otor 2 uuse, if filing)	<u> </u>							
Uni	ted States Bankruptcy Court for the	: DISTRICT OF NEW	JERSEY						
Case number (If known) 18-34384 (KCF)				Check if this is:					
					An amended filing				
	a de						ent showing postpetition as of the following date		
0	fficial Form 106I					MM / DD/ Y	YYY		
S	chedule I: Your Inc	ome					We still	12/15	
Par	t 1: Describe Employment	On the top of any additi	onal pages, write y	our nam	e and ca	se number (if	known). Answer ever	question	
1.	Fill in your employment information.	Debtor 1			Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed			☐ Employed			
		Employment status	■ Not employed			■ Not employed			
	1 1,0 3	Occupation	Retired			Retired			
	Include part-time, seasonal, or self-employed work.	Employer's name					The Albertan grate	3.4	
	Occupation may include student or homemaker, if it applies.	Employer's address						7	
		How long employed t	here?						
Par	t 2: Give Details About Mor	thly Income							
spou f you	mate monthly income as of the da ise unless you are separated. If or your non-filing spouse have mo e space, attach a separate sheet to	ore than one employer, co			employer	s for that perso	n on the lines below. If	V. T.	
					Fo	r Debtor 1	For Debtor 2 or non-filing spouse		
2.	List monthly gross wages, salar deductions). If not paid monthly, o			2.	\$	0.00	\$ 0.00		
3.	Estimate and list monthly overti	me pay.		3.	+\$	0.00	+\$0.00		
4.	Calculate gross Income. Add lin	e 2 + line 3.		4.	\$	0.00	\$0.00		

Official Form 106I Schedule I: Your Income

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Debtor 1	Bogoljub Miljkovic	- E.F.	Cas	se number (if known)	18-34	384 (F	(CF)	
			F	or Debtor 1	E-1000000000000000000000000000000000000	ebtor		
Co	py line 4 here	4.	\$	0.00	non-i	iling s	pouse 0.0	
5. Lis	t all payroll deductions:							7 1 1
221	20 20 4 10 4 10 10 10 10 10 10 10 10 10 10 10 10 10	-1	•		•			
5a. 5b.		5a.		0.00	\$		0.0	
5c.		5b.		0.00	\$		0.0	
5d.		5c. 5d.		0.00	\$		0.0	
5e.		5u. 5e.		0.00	\$	772.1077	0.0	
5f.	Domestic support obligations	5f.	\$	0.00	\$		0.0	The state of the s
5g.		5g.			\$	-	0.0	
5h.		5g. 5h.		0.00	+ \$	_	0.0	
		_	- 50		L) —			
	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$		0.0	-
7. Ca	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$		0.0	0
8. Lis 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	. \$	1,450.00	\$	1	450.0	0
8b.		8b.		0.00	\$	١,	0.0	
8c.			- 10	0.00	\$	- 9	0.0	oseli,
8d.		8d.	200	0.00	\$		0.0	
8e.		8e.		584.00	\$	1.	203.0	
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	120	0.0	editor i
8g.		8g.	. \$	0.00	\$		271.0	
8h.		8h.			+ \$	artis ()	0.0	0
9. Ad	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	2,034.00	\$		2,924.	00
10 0-	Louista manufally impages Add Eng 7 y Eng 0	10.	<u> </u>	2 224 22 1 5	0.00	24.00	= \$	4.050.00
	Iculate monthly income. Add line 7 + line 9. d the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	—	2,034.00 + \$	2,92	24.00	- J	4,958.00
11. Sta Inc oth Do	te all other regular contributions to the expenses that you list in Schedule lude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify: Contribution By Momir Miljkovic/Family Members	depe		6541		chedule 11.		1,100.00
Wr	d the amount in the last column of line 10 to the amount in line 11. The resite that amount on the Summary of Schedules and Statistical Summary of Certablies					12.	\$	6,058.00
12 D-	you aynot an ingress or degrees within the year offer you file this form	. 2					Comb	ined hly income
13. Do	you expect an increase or decrease within the year after you file this form No. Yes Explain:	17						

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45.0 (800.08)					
Il in this information to identify your case:					
Bogoljub Miljkovic	C	heck if this is:			
		An amended filing			
ebtor 2		A supplement showing postpetition chap 13 expenses as of the following date:			
pouse, if filing)		ro expenses as or	the following date.		
nited States Bankruptcy Court for the: DISTRICT OF NEW JERSEY	0.50	MM / DD / YYYY			
ase number 18-34384 (KCF)					
known)					
Official Farms 400 I	n, 1 at				
Official Form 106J					
Schedule J: Your Expenses e as complete and accurate as possible. If two married people a			SOUTHER OF		
formation. If more space is needed, attach another sheet to this umber (if known). Answer every question. art 1: Describe Your Household Is this a joint case?	s form. On the top of any add	itional pages, write	your name and case		
No. Go to line 2.					
Yes. Does Debtor 2 live in a separate household?					
☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, Expense	s for Separate Household of D	ebtor 2.			
Do you have dependents? ■ No					
Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?		
Do not state the			□ No		
dependents names.		1.69(1.90(1)	Yes		
			□ No		
		D 6 P 400-P	☐ Yes		
			□ No		
		2 2 2 c	☐ Yes		
			□ No		
		1.0140	☐ Yes		
Do your expenses include No		1 (21)			
expenses of people other than yourself and your dependents?					
yoursell and your dependents?					
art 2: Estimate Your Ongoing Monthly Expenses					
stimate your expenses as of your bankruptcy filing date unless to penses as of a date after the bankruptcy is filed. If this is a supplicable date.	you are using this form as a plemental <i>Schedule J</i> , check	supplement in a Cha the box at the top o	apter 13 case to rep of the form and fill in		
clude expenses paid for with non-cash government assistance					
e value of such assistance and have included it on <i>Schedule I:</i> 'fficial Form 106l.)	Your Income	Your exp	enses		
The rental or home ownership expenses for your residence. payments and any rent for the ground or lot.	Include first mortgage 4.	\$	3,278.00		
If not included in line 4:			7 SY C		
4a. Real estate taxes	4a.	\$	0.00		
4b. Property, homeowner's, or renter's insurance	4b.		50.00		
4c. Home maintenance, repair, and upkeep expenses	4c.		50.00		
4d. Homeowner's association or condominium dues	4d.		0.00		
Additional mortgage payments for your residence, such as ho		\$	0.00		

ebtor 1 Bog	oljub Miljkovic	Case number (if known)	18-34384 (KCF)
Utilities:			
6a. Elec	ricity, heat, natural gas	6a. \$	150.00
6b. Wate	er, sewer, garbage collection	6b. \$	50.00
6c. Tele	phone, cell phone, Internet, satellite, and cable services	6c. \$	200.00
6d. Othe	r. Specify:	6d. \$	0.00
Food and	housekeeping supplies	7. \$	600.00
	and children's education costs	8. \$	0.00
Clothing, I	aundry, and dry cleaning	9. \$	100.00
	are products and services	10. \$	50.00
1. Medical ar	d dental expenses	11. \$	150.00
2. Transport	ation. Include gas, maintenance, bus or train fare.		
Do not incli	ude car payments.	12. \$	150.00
	ent, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
	contributions and religious donations	14. \$	0.00
5. Insurance.			
	ude insurance deducted from your pay or included in lines 4 or 20.		
15a. Life i		15a. \$	0.00
	th insurance	15b. \$	0.00
	cle insurance	15c. \$	100.00
	r insurance. Specify:	15d. \$	0.00
	not include taxes deducted from your pay or included in lines 4 or 20.	40. 0	
Specify: _	· · · · · · · · · · · · · · · · · · ·	16. \$	0.00
	t or lease payments:	47- ¢	0.00
	payments for Vehicle 1	17a. \$	0.00
•	payments for Vehicle 2	17b. \$	0.00
17c. Othe	· · ·	17c. \$	0.00
17d. Othe		17d. \$	0.00
	ents of alimony, maintenance, and support that you did not report as		0.00
	rom your pay on line 5, Schedule I, Your Income (Official Form 106l). nents you make to support others who do not live with you.	\$	0.00
Specify:	ments you make to support others who do not live with you.	19.	0.00
	property expenses not included in lines 4 or 5 of this form or on Sche		
	gages on other property	20a. \$	0.00
	estate taxes	20b. \$	0.00
	erty, homeowner's, or renter's insurance	20c. \$	0.00
-	tenance, repair, and upkeep expenses	20d. \$	0.00
	eowner's association or condominium dues	20e. \$	0.00
1. Other: Spe		21. +\$	
. Outer. Spe	Gily.	Z1. T#	0.00
2. Calculate	our monthly expenses		
22a. Add lii	nes 4 through 21.	\$	4,928.00
22b. Copy	ine 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add lir	ne 22a and 22b. The result is your monthly expenses.	s —	4,928.00
	• • •		
	your monthly net income.		<u>.</u>
	line 12 (your combined monthly income) from Schedule I.	23a. \$	6,058.00
23b. Copy	your monthly expenses from line 22c above.	23b\$	4,928.00
	ract your monthly expenses from your monthly income.	23c. \$	1,130.00
The	result is your monthly net income.	200.	1,100.00
For example modification	pect an increase or decrease in your expenses within the year after you do you expect to finish paying for your car loan within the year or do you expect you to the terms of your mortgage?	ou file this form? r mortgage payment to incr	ease or decrease because o
■ No.	Eurlain hassy		
☐ Yes.	Explain here:		

Document Page 5 of 6 UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY Caption in Compliance with D.N.J. LBR 9004-1(b) Scott C. Pyfer, Esq. 20 Commerce Drive, Suite 135 Cranford, NJ 07016-2655 (908) 543-4025 scott@pyferlawgroup.com In Re: 18-34384 (KCF) Case No.: **Bogoljub Miljkovic** 13 Chapter: Judge: DISCLOSURE OF CHAPTER 13 DEBTOR'S ATTORNEY COMPENSATION Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am the attorney for 1. the debtor(s) and that compensation was paid to me within one year before the filed date of the petition, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in connection with this bankruptcy case is as follows: ■ Under D.N.J. LBR 2016-5(b), I have agreed to accept for all legal services required to confirm a plan, subject to the exclusions listed below, including administrative services that may occur postconfirmation, a flat fee in the amount of \$ 3,500.00 . I understand that I must demonstrate that additional services were unforeseeable at the time of the filing of this disclosure if I seek additional compensation and reimbursement of necessary expenses. Legal services on behalf of the debtor in connection with the following are not included in the flat fee: Representation of the debtor in: adversary proceedings, • loss mitigation/loan modification efforts, post-confirmation filings and matters brought before the Court. I have received: \$ 2,500.00 The balance due is: \$ 1,000.00 The balance \blacksquare will \square will not be paid through the plan. Under D.N.J. LBR 2016-5(c), I have agreed to accept for legal services provided on behalf of the debtor in this case, an hourly fee of \$ ____. The hourly fee charged by other members of my firm that may provide services to this client range from \$ to \$. I understand that I must receive the Court's approval of any fees or expenses to be paid to me in this case post petition pursuant to D.N.J. LBR 2016-1. I have received: \$ ____ 2. The source of the funds paid to me was: ■ Other (specify below) ☐ Debtor(s) Debtor, Debtor's spouse and son Momir

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3.	If a balance is due, the source of future compensation to be paid to me is:			
	■ Debtor(s)	□ Other (specify below)		
	I have agreed to share compen	d to share compensation with another person(s) unless they are members of my law issation with a person(s) who is not a member of my law firm, a copy of that ring in the compensation is attached.		
Date:	April 23, 2019	/s/ Scott C. Pyfer, Esq. Scott C. Pyfer, Esq. Debtor's Attorney		

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